

"DOCTORS DAY" OBSERVED IN US

Doctors Day, which is marked in the US on Mar. 30, is an annual event that honours physicians who dedicate their careers to patient care and the advancement of medical technology. The first Doctors Day was celebrated on Mar. 30, 1933 — 91 years to the day after Dr. Crawford Long successfully administered ether to a patient before removing a tumour. Each year the American Society of Anesthesiologists, which coordinates Doctors Day, encourages medical societies, auxiliaries, hospitals and community groups to hold special activities honouring physicians of yesterday and today.

US MEDIA CHOSE EASIER ROAD ON HEALTH REFORM, REPORT SAYS

An analysis of US media coverage about health care reform concludes that the politics of reform — not its impact — dominated American coverage. Health care reform was a challenging story with both social and political dimensions, said the Times Mirror Center in a report published as a supplement to the March/April issue of the *Columbia Journalism Review*, but the American press chose the "easier road to travel" by concentrating on the political aspects of reform.

"The proposal had to become law before it would have any effect, so political infighting, counter proposals and lobbying activities were nec-

essarily important aspects of the issue," said the report. "But stories that highlight conflict also attract wider audiences than those which seek to explain the intricacies of financing and providing health care to Americans (who, except for South Africans, are the only citizens of a Western democracy without universal coverage.)" The public gave the media a failing grade; in August 1994, just before health reform began its death throes, a Harris poll indicated that only 32% of respondents felt media coverage had been excellent or good.

BC PHYSICIAN-SUPPORT PROGRAM SUCCESSFUL

Stress, mental illness, inappropriate anger, family breakup and financial difficulties have in recent years accounted for 35% to 40% of cases brought to the attention of British Columbia's Physician Support Program, according to an article published in the January edition of the *BC Medical Journal*. The program was launched in 1979 in response to concerns about physicians impaired by alcoholism, but today the program provides assistance and support to physicians and their families for a much wider range of problems.

Early identification and intervention are key elements of the program, and treatment-outcome studies on substance-use disorders are very encouraging, said the article. Alcohol is the primary drug used by chemically dependent physicians (80% of cases),

with opiates a distant second at 17%. The prognosis for physicians who fully comply with recommended treatment for substance abuse is good: after the 2-year minimum follow-up period, more than 90% enjoy excellent recovery.

VACCINATION PLAN ANNOUNCED

In September, Saskatchewan will become the fourth province to offer a widespread hepatitis B immunization program. The program, which will target Grade 6 students, has a long-term goal of immunizing the entire population, and is similar to policies now in place in British Columbia, Ontario and Quebec. Parents of older children not in the target group can purchase the vaccine from public-health offices for administration by a family physician or public-health nurse. About 35 to 40 new cases of hepatitis B are reported each year in Saskatchewan, but many more cases go unreported because patients are asymptomatic.

MSNS REVISES BILLING KIT

The Medical Society of Nova Scotia (MSNS) recently revised a kit designed to help physicians and their staff deal with noninsured billings. Included are a revised guide to billing patients for noninsured services, notices, a question-and-answer

brochure and an office poster outlining approximate fees for completion of forms and reports, as well as non-insured medical services.

The kit says the public impression that all health care is free is not as pervasive as it once was, and many people now anticipate they will have to pay for some medical services. However, "it is essential that you communicate effectively and consistently with patients on noninsured services" to avoid future problems, the MSNS advises.

PHYSICIANS PLAYED KEY ROLE IN CONTROLLING COSTS

Physicians have played an important role in controlling the costs of medical services, says the Newfoundland and Labrador Medical Association (NLMA). The association was responding to the tabling of the annual report of the Newfoundland Medical Care Commission, which reported only a 0.1% increase in expenditures for insured medical services in 1993-94, with a concurrent 4.5% drop in payments to physicians as a result of participation in the joint-management process.

Since 1991, Newfoundland doctors have had their fees reduced when fee-for-service incomes exceed certain levels. In 1993-94, 81% of full-time, fee-for-service GPs and 62% of all physicians earned less than \$200 000 before overhead expenses, which represent between 25% and 40% of income. Only eight specialists had incomes of between \$400 000 and \$500 000, but they also had high overhead costs because of required diagnostic equipment and support staff. The NLMA added that physicians are a significant employer in the province, providing jobs for about 1000 people in their offices and clinics.

PRIMARY CARE ROLE PROMOTED

The Ontario College of Family Physicians is going to evaluate the role of family physicians in primary care reform and develop specific recommendations and strategies to promote that role to government, media, other providers and the public. Designated projects include consumer focus groups and provider forums, establishment of a cost-effectiveness task force, a public-relations brochure that targets patients and people who don't have a relationship with an FP, and a professional profile survey.

In addition, the college is urging its members to contact members of the provincial legislature to acquaint them with the quality of family medicine in order to help them make informed decisions about primary health care reform. The college says health care reform is inevitable, regardless of the outcome of the looming provincial election. "It is essential that we not become complacent during this seemingly calm period," Dr. Marlene Spruyt, the president, said in a letter to members. The college is not acting alone. In March, the CMA announced it and the New Brunswick Medical Society will cosponsor a similar program in New Brunswick; that program may eventually be developed in other provinces.

CANCER INSTITUTE PREDICTS 125 400 NEW CASES IN 1995

The National Cancer Institute of Canada (NCIC) estimates that 125 400 new cases of cancer will be diagnosed in the country in 1995, and 61 500 cancer-related deaths will occur. Data from the NCIC publication *Canadian Cancer Statistics 1995* indicate that lung cancer will continue to be the leading cause of cancer mortality.

Breast, colorectal and lung cancer account for at least 55% of new cases

among women; however, the incidence and mortality rates for cancers of the cervix, uterus and ovaries have declined steadily over the last 25 years. Prostate, lung and colorectal cancer account for most cancer cases in men. The report notes that while incidence rates for prostate cancer have increased rapidly due to the widespread use of early detection procedures, mortality rates have increased only slightly. The most frequently diagnosed cancer in children is acute lymphocytic leukemia.

CPHA SUPPORTS GUN-CONTROL PLANS

The Canadian Public Health Association (CPHA) has announced support for new gun-control measures introduced by Allan Rock, the federal justice minister. In a press release, CPHA spokesperson Dr. Stephen Corber said the legislation goes a long way toward meeting the association's demands for stiffer federal controls. The association is particularly encouraged by provisions for tougher penalties for crimes committed with guns, and by a national firearms-registration system.

25TH ANNIVERSARY FOR CALGARY GRADS

The University of Calgary Faculty of Medicine will celebrate its 25th anniversary and homecoming Oct. 12-14. Activities include a day-long science program featuring lectures from faculty, alumni and guest speakers. Dr. Arnold Relman, editor-in-chief emeritus of the *New England Journal of Medicine*, will deliver the first Dr. Mamoru Watanabe Lecture, speaking on current health care delivery issues. Watanabe is a former dean of medicine at the university. Other activities include family and class events; for information, call 403 220-6843.